

PROPOSAL SPECIFICATIONS**TECHNICAL PROPOSAL (100 points)**

The Technical Proposal must not exceed 25 typewritten pages. Please re-state each question as you prepare the proposal.

This section has been renumbered, and some questions combined, in order to make the evaluation process smoother.

Mandatory requirements: These responses will not be scored but must be met in order for evaluation of the proposal to take place.

1. Describe the population served by your DM proposal: proposed number of clients, ages of clients, types of conditions, geographic location.
2. How will you identify clients for your DM project? Please specify the number of potential DM clients in the population as well as the projected proportion of all appropriate clients you expect to enroll or be assigned to DM.
3. What outreach services will you perform to draw hard-to-serve clients into care?
4. How will you work with local providers to gain their participation in the DM project, and engage their commitment to serve as Primary Care Providers (PCPs)?
5. How will you work with clients who have multiple providers to decide which provider is best suited to meet their needs as a PCP?

Client Identification and Stratification for Risk (10 points)

6. How will you identify those clients at highest risk for non-adherence to recommended medical care and treatment?
7. Describe how your case management and other intervention services will vary by risk group.

Care Coordination and Education Services for Clients (65 points)

8. Describe care coordination and other services you will provide, such as:
 - types of education and how they will be tailored to the clients' individual needs,
 - methods you will use to maintain contact with enrolled clients,
 - how your staff will intervene if a problem with client, provider, or collaborating state agency is identified,
9. How will your organization work with local providers and agencies, to provide coordination of services for providers and their clients? Include community- based organizations with whom you will coordinate and how

you will communicate information about community resources to clients and potential providers.

10. How will you work with multiple case managers in other DSHS divisions, to ensure that all are aware of the treatment plan? How will your organization share pertinent information about the clients' medical and service needs?
11. How will you help manage clients who are functionally/cognitively incapable of assisting in their treatment plan, or attaining/understanding self-management objectives?
12. How will you work with providers in managing the complex medical needs of clients with multiple conditions? What assistance will you provide to health care providers in treating and interacting with complex clients?
13. For adult specific proposals: Specify how you will work with clients who have severe mental illness and substance abuse issues, especially in areas with limited community resources.
14. For child specific proposals: Specify how you will work with the families and caregivers of children with special health care needs, and gain voluntary participation in the DM project.
15. How will you provide 24 hour, 7 day per week access to nurse consultation? What are the qualifications of staff who provide this service and where will they be located? Who will be allowed access to this telephone service? How will coordination be provided between the staff of the hotline, case management staff, and the primary care provider?
16. Please provide samples of written materials you will send to clients to inform them of the DM project and to promote their self-management. These materials should be provided in the RFP response in both English and Spanish, but will be expected to be available in up to 5 additional languages. All client materials should be written at the 6th grade level.
17. Please provide copies of educational materials, client profiles, or other materials you would use to increase providers' adherence to evidence-based guidelines for care of these clients.

Evaluation and reporting (25 points)

18. For diseases and conditions most likely to affect clients in the eligible population, please describe health processes and outcomes that will be used to measure improvement in health status and provider adherence to nationally recognized, evidence-based guidelines for care.
19. Please describe your evaluation methods for client satisfaction, health status, function, and client knowledge that will be tracked and reported.

COST PROPOSAL: (100 points)

Provide a cost proposal addressing the following elements:

1. A per member per month (pmpm) rate to deliver all necessary DM services.
2. The anticipated number of clients in the eligible or assigned population.
3. The proportion of eligible clients who will actively participate (if assigned) or who will voluntarily participate (if voluntary enrollment method) in the DM project.
4. The proportion of the funds, on a pmpm basis, which will be shared with providers who participate in the DM project and agree to serve as PCPs for identified clients.
5. The projected timeline for enrollment, including the number or proportion of clients enrolled on a quarterly basis starting June 30, 2002, and ending June 30, 2003.
6. A guarantee of at least 5% savings in overall medical costs of the enrolled population, with a description of how those savings will be achieved. Your description should include a detailed method for calculating cost and utilization changes, including what your basis for comparison will be.
7. Adequate funds to participate in the cost of an external evaluation, not to exceed \$60,000 across all contractors.
8. At the bidder's option, a proposal for the sharing of cost-savings beyond the 5% mandated by the legislature, with a specific model of how those cost-savings would be calculated.

MANAGEMENT PROPOSAL (65 points)

1. Describe your organization's experience in providing case management to similar populations, i.e., Medicaid clients with complex health needs, as well as mental health and substance abuse issues. Describe other relevant experience that indicates your organizational qualifications for the performance of the potential contract.
2. Provide outcomes data from one or two previous projects, specifying whether the population for the project included Medicaid-only clients. The data should include enrollment statistics, patient/provider satisfaction, impact on utilization and costs, and contractor costs for the project.
3. Provide references from previous Medicaid projects you have managed, including the names and telephone numbers of contact people at state agencies.
4. Identify staff, including subcontractors and any local providers, who will be assigned to the potential contract, indicating the responsibilities and qualifications of such personnel. Provide resumes for the named staff, that include information on the individual's particular skills related to this project, education, experience, and any other pertinent information. Specify the minimum qualifications of staff providing case management services, and the ratio of case managers to clients. If less than 100% of the identified population are targeted for case management, specify the ratio of case managers to the targeted risk group.
5. (Moved from 4) Include letters of support from agencies who are collaborating in your DM Project.
6. Describe the data systems that will be used by your organization to gather and disseminate the required data to the external evaluator and to DSHS staff for analysis, including:
 - Tracking enrollment, disenrollment, client and provider complaints;
 - Utilization of services and identification of gaps between evidence-based guidelines and actual care received;
 - Assessment of client adherence to prescribed medical care; and
 - Disease Management services provided.